

**COMMUNITY HOUSING IMPROVEMENT PROGRAM (CHIP)
LOAN APPLICATION**



***Please read the General CHIP Program Guidelines before completing the Application and submit all required documentation with this application.**

(1) APPLICANT

First Name	Middle	Last Name	Social Security Number	D.O.B.
			- - / /	
Address		City	State	Zip Code
				Home Phone
				() -
Occupation	Employer Name and Address			Work Phone
				() -
Cell Phone				

(1a)	Marital Status (check one)	Gender (check one)	First-time Buyer (check one)	Citizenship (check one)
	<input type="checkbox"/> Single	<input type="checkbox"/> Male	<input type="checkbox"/> Yes	<input type="checkbox"/> U.S. Citizen
	<input type="checkbox"/> Divorced	<input type="checkbox"/> Female	<input type="checkbox"/> No	<input type="checkbox"/> Permanent Resident Alien
	<input type="checkbox"/> Married			

(1b) Race (check one)

<input type="checkbox"/> White	<input type="checkbox"/> American Indian/Alaskan Native & White
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Asian & White
<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American & White
<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> American Indian/Alaskan Native & Black/African American
<input type="checkbox"/> Native Hawaiian/Other Pacific Islander	<input type="checkbox"/> Other: _____

Hispanic Ethnicity (check one)

☐ Yes

☐ No

(2) HOUSEHOLD INFORMATION: List all household members and those going on title to the property. If necessary, report any additional household members on a separate sheet of paper.

Total # of persons in Household _____	Total yearly Household Income \$ _____
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Name _____	D.O.B. _____	M/F _____	Relationship to Applicant _____
Name _____	D.O.B. _____	M/F _____	Relationship to Applicant _____
Name _____	D.O.B. _____	M/F _____	Relationship to Applicant _____
Name _____	D.O.B. _____	M/F _____	Relationship to Applicant _____

(3) PROPERTY INFORMATION

Year Built _____	# of Bedrooms _____	# of Bathrooms _____	Date Purchased _____
Purchase Price \$ _____	Amount of Existing Liens \$ _____	Space Rent \$ _____	

(4) EMPLOYMENT: Must provide most current 3 months pay stubs for each job reported below. List each person in your household who works or expects to be working:

1. ↓ Last Name,			First Name	Self-Employed?	Date Employment Starts	Occupation
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
↓ Weekly Hours Worked	Hourly Pay Rate	Weekly Tips/Bonus	How often paid?	Employer's Name		
	\$	\$				
↓ Employer's Address (Street, City, State, Zip)					Employer's Phone #	Employer's Fax #
					()	()

2. ↓ Last Name,			First Name	Self-Employed?	Date Employment Starts	Occupation
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
↓ Weekly Hours Worked	Hourly Pay Rate	Weekly Tips/Bonus		How often paid?	↓ Weekly Hours Worked	
	\$	\$				
↓ Employer's Address (Street, City, State, Zip)					Employer's Phone #	Employer's Fax #
					()	()

(5) INFORMATION ON OTHER INCOME: Must provide current proof (most recent 2 statements) of any income reported below. Check YES or NO next to Type of Income. If YES, complete all information for income received or expected to receive by or for *any household member*, including children. If necessary, report any other additional sources on a separate sheet of paper.

Type of Income	Yes	No	Who Receives Funds	Monthly Amount	Name and Address of Provider
Social Security Benefits – SSA or/and SSI				\$	
				\$	
				\$	
CALWORKS				\$	
				\$	
				\$	
Food Stamps				\$	
				\$	
State Disability				\$	
				\$	
Worker's Compensation				\$	
				\$	
Unemployment Benefits				\$	
				\$	
Veteran's Benefits				\$	
				\$	
Military Pay/Allotment				\$	
				\$	
Pensions or Retirement				\$	
				\$	
Child Support				\$	
				\$	
Spousal Support				\$	
				\$	
Contributions				\$	
				\$	
Gifts or Loans				\$	
				\$	
Rental Property Income				\$	
				\$	
School Financial Aid				\$	
				\$	
Other Income				\$	
				\$	
				\$	

Any other additional sources of income reported on a separate sheet of paper attached?
☐ Yes ☐ No

(6) ASSET INFORMATION: Must provide current proof of asset (most recent 2 statements, i.e. bank statement, etc.) listed below. Check YES or NO next to Type of Asset. If YES, complete all information for any asset owned or held by or for *any household member*, including children. If necessary, report any other additional accounts or sources on a separate sheet of paper.

Type of Asset	Yes	No	Name(s) on Account	Balance/Value	Account/Policy #	Name and Address of Institution
Cash				\$		
				\$		
Checking Account				\$		
				\$		
				\$		

Savings Account				\$		
				\$		
				\$		
Other Accounts (i.e. 401k, IRAs, stocks, bonds, etc.)				\$		
				\$		
				\$		
				\$		
Any other additional sources of asset reported on a separate sheet of paper attached? <input type="checkbox"/> Yes <input type="checkbox"/> No						

IN ORDER TO PROCESS YOUR REQUEST FOR ASSISTANCE, PLEASE ANSWER THE FOLLOWING:

- Have you ever received a grant or loan from the City Of Chula Vista?
- If yes, when did you receive the grant and/or loan? _____
- Please provide a brief description of the types of improvements/repairs that you are requesting:

- Do you require a specific accommodation to fully UTILIZE our agency's SERVICES?
_____ Yes _____ No If YES, please specify how we may accommodate your disability:

Type of funding applying for: ☐ Deferred Loan (For Mobile homes only / \$8,500 max)
☐ Loan (\$15,000 max mobile home/\$24,999 max single family residence)

DECLARATIONS: If you answer "yes" to any questions, please explain on a separate sheet of paper	Borrower		Co-Borrower	
	Yes	No	Yes	No
Are there any outstanding judgments against you?				
Have you declared bankruptcy within the past 7 years?				
Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?				
Are you party to a lawsuit?				
Have you directly or indirectly been obligated on any loan, which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment?				
Are you presently delinquent or in default on any Federal loan debt or any other loan, mortgage, financial obligation, bond or loan guarantee?				
Are you obligated to pay alimony, child support or separate maintenance?				
Are you a co-maker or endorser on a note?				
Are you a U.S. Citizen?				
Are you a permanent resident alien?				
Do you currently occupy the property that you are requesting assistance for?				
How do you hold title to the property? by yourself (S), jointly with your spouse (SP) or jointly with another person (O)				
Do you own any other property?				

IMPORTANT

Do not begin any work to be approved under this program without written authorization from the City.

PLEASE SIGN AND DATE THE APPROPRIATE ACKNOWLEDGEMENT FOR THE PROGRAM YOU ARE APPLYING FOR.

A. Deferred Loan Program Acknowledgement and Agreement

By signing below you certify the following:

1. I/We have applied for a Community Housing Improvement Program (CHIP) deferred loan from the City of Chula Vista. I/We understand and agree to sign a Promissory Note, that the City shall place a lien on my/our property and that I/We shall be responsible for repayment of any funds expended should I/We sell, rent, or transfer title to my/our property within a **five-year** period from the date of the last disbursement of funds. I/We agree to cooperate with the placing of the lien and shall notify the City if I/We no longer intend to occupy the property within the five-year timeframe.
2. I/We completed an application containing personal and financial information including: employment, income, occupancy status, etc. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the application or other documents, nor did I/We omit any pertinent information.
3. I/We understand and agree that the City reserves the right to request any additional information necessary to complete the CHIP deferred loan request and verify the information provided on the application with the employer, creditor, or financial institutions.
4. I/We fully understand that it is a Federal crime punishable by fine, imprisonment or both to knowingly make any false statements when applying for this CHIP deferred loan, as applicable under the provisions of Title 18, United States Code, Section 1014.

Applicant Signature

Date

Applicant Signature

Date

B. Loan Program Acknowledgement and Agreement

The undersigned specifically acknowledge(s) and agree(s) that: (1) the loan requested by this application will be secured by a deed of trust on the property described herein; (2) the property will not be used for any illegal or prohibited purpose or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) occupation of the property will be as indicated above; (5) verification or re-verification of any information contained in the application may be made at any time by the City, its agents, successors and assigns, either directly or through a credit reporting agency, from any source named in this application, and the original copy of this application will be retained by the City, even if the loan is not approved; (6) the City, its agents, successors and assigns will rely on the information contained in the application and I/we have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (7) in the event my/our payments on the loan indicated in this application become delinquent, the City, its agents, successors and assigns, may, in addition to all their other rights and remedies, report my/our name(s) and account information to a credit reporting agency; (8) ownership of the loan may be transferred to successor or assign of the City without notice to me and/or the administration of the loan account may be transferred to an agent, successor or assign of the City with prior notice to me.

Certification: I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, section 1001, et seq. and liability for monetary damages to the City, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.

X

Borrower's Signature

Date

X

Borrower's Signature

Date